

**Seattle Department of Transportation | Street Use Division**

700 Fifth Avenue, Suite 2300 | PO Box 34996

Seattle, Washington 98124-4996

(206) 684-5267 | SDOTPermits@Seattle.gov

Permit Number

(Official Use)

STREET USE VENDING PERMIT APPLICATION (SMC 15.17)**SITE SUMMARY**

SITE ADDRESS: _____

STREET NAME: _____ FROM: _____ TO: _____

CLASSIFICATION: ☐ ARTERIAL ☐ NON-ARTERIALPERMITTEE (check one): ☐ Owner ☐ Authorized Agent

NOTE: The Permittee is responsible for deposits, billings and payments and all other Terms of this application (see Terms on the back of this form).

CONTACT INFORMATION**Owner** (Individual or Company)

Address

City, State Zip Code

Phone

Fax

Email

SDOT Customer ID

Contact Name (if different than above)

24 Hour/Job Site Phone

Authorized Agent (If other than Owner)

Address

City, State Zip Code

Phone

Fax

Email

SDOT Customer ID

Contact Name (if different than above)

WORK DESCRIPTION**TEMPORARY / SHORT TERM USE****DURATION**

MONTHLY:

☐ First Amendment Vending (19B)☐ Stadium Event Vending (19C) [April-September]☐ Stadium Event Vending (19D) [October-March]

DAILY:

☐ Temporary curb space vending (19I)**ANNUAL USE**☐ TRUCK

OR

☐ CART☐ Sidewalk/Plaza Vending (19E) DAY 6am-8pm☐ Sidewalk/Plaza Vending (19F) NIGHT 8pm-6am☐ Food-Vehicle Zone (19G) DAY 6am-8pm☐ Food-Vehicle Zone (19H) NIGHT 8pm-6am☐ Mobile-Food Vending (19J)

START DATE	DIMENSIONS of CART or TRUCK	LICENSE PLATE #

DAYS of WEEK							
DAILY HOURS							

VENDING DESCRIPTION (continued)

DETAILED DESCRIPTION *(Please provide a detailed description of the vending activity proposed in the space below)***SUBMITTAL CHECKLIST**

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Three copies of Site Plan | <input type="checkbox"/> Seattle-King County Dept. of Public Health Mobile Food Unit permit | <input type="checkbox"/> Seattle Business License | <input type="checkbox"/> Pike Place Market Historic District Certificate of Approval |
| <input type="checkbox"/> Liability Insurance (see CAM 2102) | <input type="checkbox"/> Seattle Fire Marshall Permit | <input type="checkbox"/> Access Affidavit | <input type="checkbox"/> Copy of Menu |
| <input type="checkbox"/> Photo of vending cart or food vehicle | <input type="checkbox"/> Other | <input type="checkbox"/> Other | |

TERMS**Indemnification**

The Permittee agrees to defend, indemnify, and hold harmless the City of Seattle, its officials, officers, employees, and agents against: (1) any liability, claims, causes of action, judgments, or expenses, including reasonable attorney fees, resulting directly or indirectly from any act or omission of the Permittee, its subcontractors, anyone directly or indirectly employed by them, and anyone for whose acts or omissions they may be liable, arising out of the Permittee's use or occupancy of the public right-of-way; and (2) all loss by the failure of the Permittee to fully or adequately perform, in any respect, all authorizations or obligations under the Permit.

Acceptance of terms, conditions, and requirements

Permittee shall accept the terms, conditions, and requirements of the permit and agree to comply with them to the satisfaction of the Seattle Department of Transportation, Street Use Division. Permittee further agrees to comply with all applicable city ordinances, including but not limited to Title 15 SMC, and all applicable requirements of state and federal law. Work shall begin within six months from the date of approval unless other arrangements are made, otherwise the application shall be void.

Applicant or Authorized Agent Statement

I declare under penalty of perjury under the laws of the State of Washington that: I am the Applicant AND the Owner OR the authorized agent of the owner; that the information provided herein is correct and complete; and that I have the authority to bind the owner to this application.

Deposits, Charges, and Future Billings

The Permittee is responsible for all permit charges. If a deposit was made for estimated future Street Use services, any unused portion of the deposit will be refunded to the permittee. Any charges in excess of the deposit will be billed to the Permittee.

APPLICANT SIGNATURE: _____ DATE: _____

*(Official Use)***REQUIRED AT APPLICATION**

- | | |
|--|---|
| <input type="checkbox"/> Three copies of Site Plan | <input type="checkbox"/> Use Description |
| <input type="checkbox"/> King County Health permit | <input type="checkbox"/> Access Affidavit |
| <input type="checkbox"/> Fire Marshall permit | <input type="checkbox"/> Pike Place Market C of A |
| <input type="checkbox"/> Seattle Business License | <input type="checkbox"/> Copy of Menu |

REQUIRED PRIOR TO ISSUANCE

- | | |
|---|--|
| <input type="checkbox"/> Public Notice Contact List | <input type="checkbox"/> Proof of Insurance |
| <input type="checkbox"/> Parks Dept. Recommendation | <input type="checkbox"/> Construction Permit |
| <input type="checkbox"/> | <input type="checkbox"/> |

☐ Deposit: \$ _____

Comment Period:

Start Date:

End Date:

COMMENTS:

APPLICATION ACCEPTED BY: _____

DATE: _____

APPLICATION APPROVED BY: _____

DATE: _____